

4-9-01

PTO/SB/05 (11-00)

Please type a plus sign (+) inside this box ☐

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.UTILITY  
PATENT APPLICATION  
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

First Inventor

Hillel Felman

Title

Method and Apparatus For Selective-ly Releasing Personal Contact Inf. .

Express Mail Label No.

EK317797998US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 48]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 19]
5. Oath or Declaration [Total Pages 2]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 18 completed)
    - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)
6. ☐ Application Data Sheet. See 37 CFR 1.76

## ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other: .....

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No. \_\_\_\_\_ / \_\_\_\_\_

Prior application information

Examiner \_\_\_\_\_

Group Art Unit \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☐ Correspondence address below

Name

Mr. Rinaldo Del Gallo, III Esq.

Address

79 Nancy Avenue

City

Pittsfield

State

MA

Zip Code

01201

Country

Telephone

413-443-3150

Fax

413-499-0187

Name (Print/Type)

Rinaldo Del Gallo, III

Registration No. (Attorney/Agent)

42, 474

Signature

Date

April 6, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$)

## Complete if Known

Application Number

Filing Date

April 6, 2001

First Named Inventor

Hillel S. Felman

Examiner Name

Group Art Unit

Attorney Docket No.

## METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Small Entity

Fee Fee Fee Fee Fee Description

Code (\$) Code (\$) Code (\$) Code (\$) Code (\$)

101 710 201 355 Utility filing fee

106 320 206 160 Design filing fee

107 490 207 245 Plant filing fee

108 710 208 355 Reissue filing fee

114 150 214 75 Provisional filing fee

Fee Paid

355

SUBTOTAL (1) (\$)

355

### 2. EXTRA CLAIM FEES

Extra Claims Fee from below Fee Paid

Total Claims 178 -20\*\* = 158 x 9 = 1,422

Independent Claims 7 -3\*\* = 4 x 40 = 160

Multiple Dependent

Large Entity Small Entity

Fee Fee Fee Fee Fee Description

Code (\$) Code (\$) Code (\$) Code (\$) Code (\$)

103 18 203 9 Claims in excess of 20

102 80 202 40 Independent claims in excess of 3

104 270 204 135 Multiple dependent claim, if not paid

109 80 209 40 \*\* Reissue independent claims over original patent

110 18 210 9 \*\* Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

1,582

\*\*or number previously paid, if greater, For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Small Entity

Fee Fee Fee Fee Fee Description

Code (\$) Code (\$) Code (\$) Code (\$) Code (\$)

105 130 205 65 Surcharge - late filing fee or oath

127 50 227 25 Surcharge - late provisional filing fee or cover sheet

139 130 139 130 Non-English specification

147 2,520 147 2,520 For filing a request for ex parte reexamination

112 920\* 112 920\* Requesting publication of SIR prior to Examiner action

113 1,840\* 113 1,840\* Requesting publication of SIR after Examiner action

115 110 215 55 Extension for reply within first month

116 390 216 195 Extension for reply within second month

117 890 217 445 Extension for reply within third month

118 1,390 218 695 Extension for reply within fourth month

128 1,890 228 945 Extension for reply within fifth month

119 310 219 155 Notice of Appeal

120 310 220 155 Filing a brief in support of an appeal

121 270 221 135 Request for oral hearing

138 1,510 138 1,510 Petition to institute a public use proceeding

140 110 240 55 Petition to revive - unavoidable

141 1,240 241 620 Petition to revive - unintentional

142 1,240 242 620 Utility issue fee (or reissue)

143 440 243 220 Design issue fee

144 600 244 300 Plant issue fee

122 130 122 130 Petitions to the Commissioner

123 50 123 50 Processing fee under 37 CFR 1.17(q)

126 180 126 180 Submission of Information Disclosure Stmt

581 40 581 40 Recording each patent assignment per property (times number of properties)

146 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(a))

149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))

179 710 279 355 Request for Continued Examination (RCE)

169 900 169 900 Request for expedited examination of a design application

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

1,937.00

## SUBMITTED BY

Name (Print/Type)

Rinaldo Del Gallo, II

Signature

Registration No. (Attorney/Agent)

42,474

Complete (if applicable)

Telephone

413-443-3150

Date

April 6, 2001

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

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**Rinaldo Del Gallo III, Esq.**

Registered Patent Attorney

79 Nancy Avenue

Pittsfield, MA 01201

Phone: (413) 443-3150

Fax: (413) 499-0187

The United States Patent and Trademark Office  
Assistant Commissioner for Patents  
Box Patent Application  
Washington, D.C. 20231

Dear Sir:

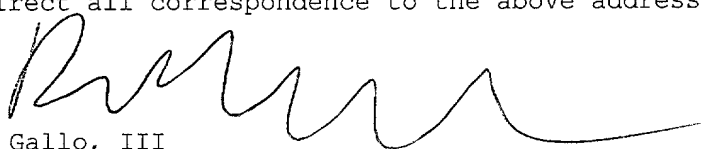
Please find enclosed:

1. A patent application entitled "Method and Apparatus for Selectively Releasing Personal Contact Information Stored in an Electronic or Telephonic Database," including 48 pages of specification and 19 pages of drawings.
2. A Utility Patent Application Transmittal Sheet (PTO/SB/05).
3. A letter requesting a change of address of the patent attorney addressed to the Office of Enrollment and Discipline.
4. An Information Disclosure Sheet (Full copies of the cited patents will be provided at a later date).
5. A Declaration for Utility or Patent Application (PTO/SB/01).
6. A Fee Transmittal Sheet for FY 2001 (PTO/SB/17)
7. A check in the order of \$1,937 made payable to the Patent and Trademark Office from the inventor, Mr. Hillel S. Felman, check no. 721 from Citibank, account number 021000089 58561919.
8. A Power of Attorney or Authorization of Agent Sheet (PTO/SB/81)

Please direct all correspondence to the above address.

Sincerely,

Rinaldo Del Gallo, III



**The Law Office of Rinaldo Del Gallo, III**

Registered Patent Attorney

79 Nancy Avenue

Pittsfield, MA 01201

(413) 443-3150

(413) 499-0187

April 6, 2001

Commissioner of Patents and Trademarks  
The United States Patent and Trademark Office  
Office of Enrollment and Discipline  
Box OED  
Washington, D.C. 20231

RE: Registration Number 42,474

Dear Sir or Madam:

Please change your records to reflect my change of address to:

79 Nancy Avenue  
Pittsfield, MA 01201

Should you have any questions, please feel free to contact me.

Sincerely,

A handwritten signature in black ink, appearing to be 'R Del Gallo', written in a cursive style.

Rinaldo Del Gallo, III  
Registration Number 42, 474

100-443-3150